

Officer: _____ ☐ 10month ☐ 11/ 12 month District: _____
Officer: _____ ☐ 10month ☐ 11/ 12 month Site: _____

School Safety Program
FY 2007 Cooperative Agreement
DUE APRIL 15, 2006

We, the undersigned, acknowledge we will coordinate and cooperate in the School Safety Program if funds are awarded. By signing this agreement we also give our assurance of the following items:

- We are in agreement with the budget submitted
- We will uphold the intent of the grant, which includes but not limited to:
 - Provide for 180 hours of law-related education
 - Ensure full-time officer presence on campus during school hours
- We will provide an officer during the 2006-2007 school year
- We understand each party's responsibility under the program
- We will enter into a Service Agreement (or IGA)

Print Name: _____ Title: _____
Authorized Local Law Enforcement Agent

Signature: _____

Agency: _____

Print Name: _____ Title: _____
Authorized Local Law Enforcement Agent

Signature: _____

Agency: _____

Print Name: _____ Title: _____
Authorized County Juvenile Probation Agent

Signature: _____

Agency: _____

Print Name: _____ Title: _____
School Principal

Signature: _____

Print Name: _____ Title: _____
District Superintendent

Signature: _____